

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-015-35162
1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐		5. Indicate Type of Lease STATE ☐ FEE ☐
2. Name of Operator BEPKO, L.P.		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 2760 Midland, TX 79702		7. Lease Name or Unit Agreement Name POKER LAKE UNIT
4. Well Location Unit Letter C : 1140 feet from the NORTH line and 2310 feet from the WEST line Section 25 Township 24S Range 30E NMPM County EDDY		8. Well Number 102
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3447' GL		9. OGRID Number 001801
Pit or Below-grade Tank Application ☐ or Closure ☒		
Pit type DRILLING Depth to Groundwater >100' Distance from nearest fresh water well >200' Distance from nearest surface water >1000'		
Pit Liner Thickness: 12 mil Below-Grade Tank: Volume 7300 bbls; Construction Material SYNTHETIC		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: PIT CLOSURE ☒

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

PIT CLOSED 12/13/06 PER PIT CLOSURE PLAN APPROVED ON 10/30/06.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Cindi Goodman TITLE Production Clerk DATE 02/02/2007

Type or print name Cindi Goodman

E-mail address: cdgoodman@basspet.com

Telephone No. (432)683-2277

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):